

CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF		CANDIDATE	<input checked="" type="checkbox"/>	COMMITTEE	<input type="checkbox"/>	LOBBYIST	<input type="checkbox"/>	
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Jason E Salus										
STREET ADDRESS 2059 Wisteria Lane										
CITY Lafayette Hill				STATE PA		ZIP CODE 19444				
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.	PARTY		DATE OF ELECTION		
6TH TUESDAY PRE-PRIMARY		Montgomery County Treasurer				DEM		MO.	DAY	YEAR
2ND FRIDAY PRE-PRIMARY								11	3	15
30 DAY POST-PRIMARY										
6TH TUESDAY PRE-ELECTION										
2ND FRIDAY PRE-ELECTION										
30 DAY POST-ELECTION										
ANNUAL REPORT										
								FOR OFFICE USE ONLY		
								RECEIVED		
								2016 FEB - 1 PM 3:04		
								OFFICE OF VOTER SERVICES MONTG. CO. PA		
		DATES OF REPORTING PERIOD								
		MO. DAY YEAR			MO. DAY YEAR					
		11 24 15			TO 12 31 15					
		CASH BALANCE AT END OF REPORTING PERIOD:			\$ 0					
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:			\$ 0					
		AMENDMENT REPORT?			YES			NO		
								/		
		TERMINATION REPORT?			YES			NO		
								/		

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS

28th DAY OF January 2016

SoKunthea Thong
 COMMONWEALTH OF PENNSYLVANIA
 Notarial Seal
 SoKunthea Thong, Notary Public
 Upper Merion Twp., Montgomery County
 My Commission Expires Oct. 27, 2017
 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

Jason Evan Salus
 SIGNATURE OF PERSON SUBMITTING REPORT
 JASON EVAN SALUS
 PRINTED NAME
 267 626-8040
 AREA CODE DAYTIME TELEPHONE NUMBER

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here.

I SWEAR (OR AFFIRM) THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS POLITICAL COMMITTEE HAS NOT VIOLATED ANY PROVISIONS OF THE ACT OF JUNE 3, 1937 (P.L. 1333, No. 320) AS AMENDED.

SWORN TO AND SUBSCRIBED BEFORE ME THIS

_____ DAY OF _____ 20____

 SIGNATURE OF CANDIDATE

 PRINTED NAME

 AREA CODE DAYTIME TELEPHONE NUMBER

MY COMMISSION EXPIRES _____

MO. DAY YR.